

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT : **PACHA, Ted H., et al.**
SERIAL NO : **10/773,926**
FILED : **February 6, 2004**
TITLE : **UNIVERSAL COMPREHENSIVE IMMUNIZATION
IDENTIFICATION METHOD**

Grp./A.U. : **3709**
Examiner : **PATEL, Shefali Dilip**
Conf. No. : **8477**
Docket No. : **P06452US00**

RULE 132 DECLARATION OF KIRK M. HARTUNG

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

I, Kirk M. Hartung, hereby declare the following:

1. I am the attorney of record of the invention set forth in the above captioned application.
2. The present invention describes a Universal Comprehensive Immunization Identification Method.
3. I have received letters concerning the Universal Comprehensive Immunization Identification Method from a Dr. Paul H. Koob, D. O. dated November 1, 2007 and a Dr. William H. Otteman, D.O. and Ms. Anna M. Otteman, Public Health Administrator, dated November 12, 2007, attached hereto.

4. Dr. Koob, Dr. Otteman and Ms. Otteman are all healthcare professionals, Doctors of Osteopathic Medicine and a Public Health Administrator, practicing with the Medical Associates of Maquoketa, P.C. with offices in Maquoketa, Iowa and Wyoming, Iowa.

5. The letters I received illustrate the praise and acclaim given to the Universal Comprehensive Immunization Identification Method described in the present patent application by those in the relevant industry and skilled in the pertinent art.

6. Dr. Koob states that a problem in the art is the lack of a "method of keeping good records on the type of medication given with multiple medications and where these are given to the children," and that the Universal Comprehensive Immunization Identification Method "addresses all of these issues."

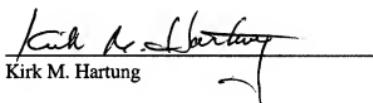
7. Dr. Koob also remarks that the method could help minimize the issue of liability associated with immunizations. He states that the method "significantly reduces risks for the doctors, nurses and manufacturers of these medications. . . it would be a very significant benefit to use this type of system universally."

8. Dr. and Ms. Otteman state that the Universal Comprehensive Immunization Identification Method would increase efficiency and be valuable in a variety of settings.

9. These skilled-in-the-art professionals confirm the ongoing problems which have not been resolved by the prior art and which are addressed by Applicants' invention. The opinions of these medical field practitioners are evidence of the non-obvious nature of the claimed invention.

10. I hereby declare that all statements made herein of my own knowledge are true, and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

Date: 12-17-07



Kirk M. Hartung

MEDICAL ASSOCIATES OF MAQUOKETA, P.C.

MAIN CLINIC
611 West Quarry Street
Maquoketa, Iowa 52060
Phone 563-652-5145
Fax 563-652-3674

PAUL H. KOOB, D.O.
RAYMOND M. HAMILTON, D.O.
WILLIAM H. OTTEMAN, D.O.
ERIC S. PETERSEN, D.O.
KIMBERLY A. THOMPSON, D.O.
CAROL GORNEY, P.A.

SATELLITE CLINIC
307 East Webster Street
Wyoming, Iowa 52362
Phone 563-488-2297
Fax 563-488-3133

November 12, 2007

TO WHOM IT MAY CONCERN:

We have reviewed the proposed Universal Comprehensive Immunization Identification System and we both feel that the concept would be valuable in various practices. We believe it would increase efficiency and improve documentation for immunizations of individuals. We understand that this system was set up by the inventor's experience as an office nurse for many years. Her insight in stream lining the office immunizations is obviously valuable in producing this present comprehensive immunization identification system. If any further information is needed please contact us.

Sincerely,



William H. Ottman, D.O.
Anna M. Ottman, Public Health Administrator

WHO/clb

MEDICAL ASSOCIATES OF MAQUOKETA, P.C.

MAIN CLINIC
611 West Quarry Street
Maquoketa, Iowa 52060
Phone 563-652-5145
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307 East Webster Street
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November 1, 2007

RE: TeBe Immunization Identification System.

TO WHOM IT MAY CONCERN:

I have been involved in private family practice for the past 31 years and the immunization situation has changed dramatically during that time from the type of immunizations given and the number given, especially in the first year and a half of life. One of the things that has caused problems during this time of constant change has been a method of keeping good records on the type of medication given with multiple medications and where these are given to the children as far as their injection sites are concerned. All of these areas have high risks of liability, especially if one would have a reaction to one of the specific immunizations and then not being able to address which one was given in a specific area of the body.

The TeBe immunization identification system is a system that I think addresses all of these issues very specifically and significantly decreases the risks of liability due to the immunizations. The fact that it is color coded, bar marked for electronic records and has a specificity involving the type of immunization and the exact injection site all due to a simple bandaid significantly reduces risks for the doctors, nurses and manufacturers of these medications. I think it would be a very significant benefit to use this type of system universally.

If you have any further questions or if I can be any help in this regard please do not hesitate to contact me. Thank you for your time.

Sincerely,

Paul H. Koob, D.O.

PHK/clb

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